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CURRENT CORRESPONDENCE ADDRESS

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Brent Yonehara (Depositor's name)

(Signature)

April 27, 2007 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTY'S DOCKET NO.	CONFIRMATION NO.
09/760,384	01/11/2001	HAU H. DUONG	67456-5033US	2482

TITLE OF INVENTION: DEVICES AND METHODS FOR BIOCHIP MULTIPLEXING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	04/30/2007

EXAMINER	Art Unit	CLASS-SUB CLASS
SINES, BRIAN J	1743	422-068100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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1. **Morgan Lewis & Bockius LLP**

2. **Robin M. Silva**

3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE:

Clinical Micro Sensors, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Pasadena, California

Please check the appropriate assignee category or categories (will not be printed on the patent)

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(Authorized Signature)

(Date) APRIL 27, 2007

ROBERT B. EDESESS (Reg. No. 56,528)

FOR: ROBIN M. SILVA (Reg. No. 38,304)

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